



REGISTRATION RENEWAL NOTICE

CURRENT LICENSE PLATE NUMBER		VIN NUMBER			DO NOT WRITE IN THIS BOX • FOR DMV USE ONLY	
					CLASS:	EXPIRATION DATE:
MAKE	YEAR	WEIGHT	BODY STYLE	TITLE NUMBER	OWNER'S STATEMENT OF INSURANCE DRIVING WITHOUT AUTO INSURANCE IN WV IS AGAINST THE LAW.	
NAME(S) EXACTLY AS SHOWN ON TITLE						
					CHECK THIS BOX IF YOUR ADDRESS HAS CHANGED <input type="checkbox"/>	
CURRENT STREET ADDRESS / MAILING ADDRESS						
CITY	COUNTY	STATE	ZIP	NAME OF INSURANCE COMPANY NAME OF INSURANCE AGENT POLICY NUMBER VALID FROM: / / TO: / / NAIC NUMBER		
CLASS A REGISTRATION FEES AND INSTRUCTIONS <i>(For cars and trucks under 8001 lbs. GVW, standard)</i>						
All vehicle insurance information must be completed. Your personal property tax receipt or exemption from your county courthouse must be enclosed.		Make your selection below: <input type="checkbox"/> \$30.00 for ONE Year <input type="checkbox"/> \$60.00 for TWO Years <input type="checkbox"/> Add \$10.00 for Scenic Plate		MAIL TO: WV DMV PO Box 17110 Charleston, WV 25317		
<i>The price of your renewal also includes the mandatory \$1.00 litter fee and .50¢ insurance fee.</i>						

I hereby state, under penalty of false swearing and penalties provided for in Chapters 17A and D of the West Virginia Code, that there is in effect a **MOTOR VEHICLE LIABILITY POLICY** upon the vehicle described herein, in accordance with provisions of the West Virginia Code.

(X) _____	/ /
OWNER SIGNATURE	DATE
(X) _____	/ /
OWNER SIGNATURE	DATE